MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. _10763143_   FILING DATE _01-22-04_

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT												
	IND	DEP	IND	DEP	IND	DEP			IND	DEP	IND	DEP	IND	DEP
1								51						
2								52						
3								53						
4								54						
5								55						
6								56						
7								57						
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39								89						
40								90						
41								91						
42								92						
43								93						
44								94						
45								95						
46								96						
47								97						
48								98						
49								99						
50								100						
TOTAL IND.	2							TOTAL IND.						
TOTAL DEP.	7							TOTAL DEP.						
TOTAL CLAIMS	9							TOTAL CLAIMS						